## State of Delaware Group Health Insurance Program New Medical Plan Rates Effective July 1, 2010

	Total		Employee/
	Monthly	State Pays	Pensioner
	•	State Pays	
	Rate		Contributions
First State Basic Plan			
(includes prescription drug coverage at the same level as all other plans)			
Administered by Blue Cross Blue Shield of Delaware			
Employee	\$514.56	\$514.56	\$0.00
Employee & Spouse	\$1,064.66	\$1,064.66	\$0.00
Employee & Child(ren)	\$782.20	\$782.20	\$0.00
Family	\$1,330.86	\$1,330.86	\$0.00
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Aetna HMO			
Administered by Aetna			
Employee	\$537.22	\$514.56	\$22.66
Employee & Spouse	\$1,132.64	\$1,064.66	\$67.98
Employee & Child(ren)	\$821.80	\$782.20	\$39.60
Family	\$1,413.30	\$1,330.86	\$82.44
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BlueCARE® HMO  Administered by Blue Cross Blue Shield of Delaware			
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Employee	\$537.66	\$514.56	\$23.10
Employee & Spouse	\$1,136.22	\$1,064.66	\$71.56
Employee & Child(ren)	\$822.62	\$782.20	\$40.42
Family	\$1,417.62	\$1,330.86	\$86.76
Comprehensive DDC Blon			
Comprehensive PPO Plan  Administered by Blue Cross Blue Shield of Delaware			
Employee	\$587.46	\$514.56	\$72.90
Employee & Spouse	\$1,219.04	\$1,064.66	\$154.38
Employee & Spouse Employee & Child(ren)	\$1,219.04 \$905.38	\$1,064.66 \$782.20	\$154.36 \$123.18
Family	\$905.38 \$1,523.98	\$782.20 \$1,330.86	\$123.16 \$193.12
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Medicare Supplement			
Administered by Blue Cross Blue Shield of Delaware			
Special Medicfill with Prescription	\$414.26	\$414.26	\$0.00
Special Medicfill without Prescription*	\$191.76	\$191.76	\$0.00
*Medicare Supplement plan WITHOUT prescription is provided for Medicare Beneficiaries enrolled in Medicare Part D			